. WC DOCKET NO. -10-90

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	orm 481 - Carrier Annual Reporting Collection Form		FCC Form 4 CONTRIBUTION CANTRIBUTION
	Study Area Code		Avg. Burden Estimate per Respondent; 28 Hol
	Study Area Name		52901
		Re	ceived & Inspecial Corporation
<020>		110	OCT 9 0 2013 201
<030>	Contact Name: Person USAC should contact with questions about this data		Mark Lammer
<035>	Contact Telephone Number: Number of the person identified in data line <030>	-	CC Mall Room 407-260-101:
<039>	Contact Email: Email of the person identified in data line <030>		regulatory@csilongwood.con
ANNÜ	AL REPORTING FOR ALL CARRIERS		54.313 54.422 Completion Completion Required Required
<100>	Service Quality Improvement Reporting	(complete attached worksheet)	(check box when complete)
<200> <210>	Outage Reporting (voice) < check box if no outage	(complete attached worksheet) es to report	
<300>	Unfulfilled Service Requests (voice)		
	Detail on Attempts (voice) Unfulfilled Service Requests (broadband)	(attach descriptive document)	
<330>	Detail on Attempts (broadband)	(attach descriptive document)	
<400>	Number of Complaints per 1,000 customers (voice)		
<410>	Fixed 0		V
<420>	Mobile 0		
<440>	Number of Complaints per 1,000 customers (broadband)		
<450>	Mobile		
<500>	Service Quality Standards & Consumer Protection Rules Com	pliance (check to indicate certification)	V
<510>	Functionality in Emergency Situations	(attached descriptive document)	V
<610>	runctionality in Emergency Situations	(check to indicate certification)	V
	Company Price Offerings (voice)	(attached descriptive document)	V
<710>	Company Price Offerings (broadband)	(complete attached worksheet)	
<800>	Operating Companies and Affiliates	(complete attached worksheet) (complete attached worksheet)	
	Tribal Land Offerings (Y/N)?	(if yes, complete attached worksheet)	
	Voice Services Rate Comparability	(check to indicate certification)	
<1010>	Township B. H. Lindon	(attach descriptive document)	
<11100>	Terrestrial Backhaul (Y/N)?	(if not, check to indicate certification)	
	Terms and Condition for Lifeline Customers	(complete attached worksheet) (complete attached worksheet)	V
<2000> <2005>	Price Cap Carriers, Proceed to <u>Price Cap Additional Documer</u> Including Rate-of-Return Carriers affiliated with Price Cap Loc	ntation Worksheet al Exchange Carriers (check to indicate certification) (complete attached worksheet)	
. 1	Rate of Return Carriers, Proceed to <u>ROR Additional Docume</u>	ntation Worksheet	
<3000>		(check to indicate certification)	18138182223
<3005>		(complete attached worksheet)	
		No. o List A	f Copies rec'd ()+/

	Programme year.	
	How (USF) was used to improve service quality How (USF)was used to improve service coverage How (USF) was used to improve service capacity Provide an explanation of network improvement targets not met	<115> Ho 16 Ho 17 Ho 17 Ho 18 Pro
	Maps detailing progress towards meeting plan targets Report how much universal service (USF) support was received	<113> M <114> Re
	plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	, C D
Name of Attached Document (.pdf)	Nease check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement	H 12
	Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which receives only frozen support, your progress report is only required to address voice telephony service	<112> y
	voice telephony service.	< 1
	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing §	n ¬
	4.202(a) "5	<111>)
MOODOW MINIMANT TO COMPANY TO COM	Has your company received its ETC certification from the FCC?	<110>
407-260-1011	Contact Email Address - Email Address of person identified in data line <030>	<039>
Mark Lammert	Contact Telephone Number - Number of person identified in data line <030>	ł
2014	Contact Name - Person USAC should contact regarding this data	<030>
Telrite Corporation	Program Year	<020>
529019	Study Area Name	1]
July 2013	Study Area Code	<010>
UMB Control No. 3060-0986 OMB Control No. 3060-0819		
FFO T-L Ga	(100) Service Quality Improvement Reporting	(100) Service Quality In

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regulatory@csilongwood.com			
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Needs assessment and deployment planning with a focus on Tribal community anchor institutions; Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes Compliance with Land Use permitting requirements Compliance with Facilities Siting rules Compliance with Environmental Review processes Compliance with Cultural Preservation review processes Compliance with Tribal Business and Licensing requirements.	If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:	Tribal Government Engagement Obligation	Tribal Land(s) on which ETC Serves	Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	Study Area Name Program Year	(900) Tribal Lands Reporting Data Collection Form <010> Study Area Code
Select (Yes,No, NA)	Name of Attached Document (.pdf)		regulatory@csilc		529019 Telrite Corporation	FCC Form 481 OMB Control No. 3060-0986 OMB Control No. 3060-0819 July 2013

	Please check this box to confirm the reporting carrier offers <1130> broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	Please check this box to confirm no terrestrial backhaul <1120> options exist within the supported area pursuant to § 54.313(G)	<015> Study Area Name <020> Program Year <030> Contact Name - Person USAC should contact regarding this data <035> Contact Telephone Number - Number of person identified in data line <030> <039> Contact Email Address - Email Address of person identified in data line <030>	<u> </u>
		regulatory@csilongwood.com	529019 Telrite Corporation 2014 D> Mark Lamment 407-260-1011	FCC Form 481 OMB Control No. 3060-0986 OMB Control No. 3060-0819 July 2013

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Additional charges for toll calls, and rates for each such plan.	Details on the number of minutes provided as part of the plan,	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:	Link to Public Website HTTP www.lifewireless.com	Name of attached document (.pdf)	Terms & Conditions of Voice Telephony Lifeline Plans		Contact Email Address - Email Address of person identified in data line <030>	Contact Telephone Number - Number of person identified in data line <030>	Contact Name - Person USAC should contact regarding this data	Program Year	Study Area Name	Study Area Code	Data Collection Form	(1200) Terms and Condition for Lifeline Customers Lifeline
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	contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.			Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband				Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a)) 2013 Frozen Support Certification	3rd Year Certification {47 CFR § 54.313(b)(2)}	Incremental Connect America Phase I reporting 2nd Year Certification (47 CFR § 54.313(b)(1))	CHECK the boxes below to note compliance as a recipient of incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.							Study Area Code	(2000) Price Cap Carrier Additional Documentation Data Collection Form Including Rate-of Return Carriers offiliated with Price Cap Local Exchange Camers
Name of Attached Document Listing Required Information												liance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge red support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.								
		Γ										t access charge reductions, and Connect America Phase II below is accurate.	Control of the contro	regulatorum reilonamond c	407-760-1011	Mark Lammert	2014	Telrite Corporation	529019	FCC Form 481 OMB Control No. 3060-0986 OMB Control No. 3060-0819 # July 2013

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529019 Teirite Corporation 2014 Mark Lammert	986 986
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Page 9

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	Name of Attached Document Listing Required Information		
		Attach the worksheet listing required information	26)
		PDF of Balance Sheet, Income Statement and Statement of Cash Flows	
		Underlying information subjected to an officer certification.	24
]		Underlying information subjected to a review by an independent certified public accountant	
		Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,	
		If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	
		 Management letter issued by the independent certified public accountant that performed the company's financial audit. 	021)
		Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications PDF of Balance Sheet, Income Statement and Statement of Cash Flows	3019) 3020)
(Yes/No)			
	Name of Attached Document Listing Required Information		3017)
			(3016)
(Ves/No)	Name of Attached Document Listing Required Information		(3012) (3013) (3014)
		contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	
	Name of Attached Document Listing Required Information		(3010)
'g compliance with the financial reporting requirements set for iched below is accurate.	CFR 9 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.	LFK 9 34.333(f)(2). I further certify the Progress Report on 5 Year Plan	
	plan (pursuant to 47 CFR § 54,202(a)) and for microck hold	CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CRR § 54,203/a)) and for reference to the compliance on its five year service quality plan (pursuant to 47 CRR § 54,203/a)) and for reference to the compliance of the co	욨
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Data Collection Form	FCC Form 481
	OMB Control No. 3060-098
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<010> Study Area Code	July 2013
<015> Study Area Name	
<020> Program Year	529019
<030> Contact Name - Person USAC should contact regarding this data <035> Contact Telephone Name - Name	Teirite Corporation
<035> Contact Telephone Number No.	2014
<035> Contact Telephone Number - Number of person identified in data line <030> <039> Contact Email Address - Email	Mark Lammert
<039> Contact Email Address - Email Address of person identified in data line <030>	407-260-1011
CARRIER, IF THE REPORTING CAPPIED IS THE PARTY OF THE PAR	
certify that Jaman officer of the control of the co	
ertify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annu cipients; and, to the best of my knowledge, the information reported on this form and in any attachments is ac	
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certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annu- cipients; and, to the best of my knowledge, the information reported on this form and in any attachments is ac- time of Reporting Carrier: Teirite Corporation	ial reporting requirements for universal service support curate.
certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annu- ciplents; and, to the best of my knowledge, the information reported on this form and in any attachments is ac- time of Reporting Carrier; Teirite Corporation inature of Authorized Officer; Kelly Jesel	ial reporting requirements for universal service support curate.
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ertify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annu- ciplents; and, to the best of my knowledge, the information reported on this form and in any attachments is ac me of Reporting Cerrier: Teirite Corporation nature of Authorized Officer:	al reporting requirements for universal service support curate. Date 10.14.2013

regulatory@csilongwood.com

Certification - Agent / Carrier Data Collection Form	FCC Form 481. OMB Control No. 3060-0986 OMB Control No. 3060-0819 July 2013
<010> Study Area Code	7.017 CO13
<015> Study Area Name	529019
<020> Program Year	Telrite Corporation
<030> Contact Name - Person USAC should contact regarding this data	2014
<035> Contact Telephone Number - Number of person identified in data line <030>	Mark Lammert
<039> Contact Email Address - Email Address of person identified in data line <030>	407-260-1011
. Attanted in data fille 10507	regulatory@csilongwood.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

also certify that am an officer of the reporting care	ethorize an Agent to File Annual Reports for CAF or LI Re is authorized to subner; my responsibilities include ensuring the accuracy of the and data provided to the authorized agent is accurate.	
Name of Authorized Agent:		
Name of Reporting Carrier:		
Signature of Authorized Officer:		
Printed name of Authorized Officer:		Date:
Title or position of Authorized Officer:		
Telephone number of Authorized Officer:		
Study Area Code of Reporting Carrier:	Filing Dun Data family 6	
Persons willfully making false statements on this for	Filing Due Date for this form: m can be punished by fine or forfeiture under the Communications Act o under Title 18 of the United States Code, 18 U.S.C. § 1001.	10/15/2013 of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.				
Name of Authorized Agent or Employee of Agent:				
Signature of Authorized Agent or Employee of Agent:				
Printed name of Authorized Agent or Employee of Agent:		Date:		
litle or position of Authorized Agent or Employee of Agent				
Telephone number of Authorized Agent or Employee of Agent:				
tudy Area Code of Reporting Carrier:	Filing Due Date for this form:			
Persons willfully making false statements on this form can be puni	shed by fine or forfeiture under the Communications Act 18 of the United States Code, 18 U.S.C. § 1001.	10/15/2013 of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title		



FCC Form 481

Section 500 - Service Quality Standards & Consumer Protection Rules Compliance

Under FCC Rules, Section 54.202, an ETC must comply that it will satisfy applicable consumer protection and service quality standards. Telrite Corporation d/b/a Life Wireless (Telrite) is in for Wireless Service.

- 1. Telrite discloses rates and terms of service to customers at the time service is initiated. These same terms and conditions are posted on Telrite's website at www.lifewireless.com.
- 2. Telrite provides service availability information on their website at www.lifewireless.com.
- 3. Telrite provides contract terms to subscribers when they initiate or change service. These same terms are provided to subscribers during the annual recertification process as outlined in Commission rules that govern continued subscriber eligibility.
- 4. Telrite's Lifeline service can be terminated at any time by either party without an early termination fee. Service is dependent on continued usage and eligibility in the program.
- 5. Telrite provides disclosures, minutes included in Lifeline plans, expiration of rollover minutes, availability of service, and cost for additional minutes in published Lifeline advertising materials.
- 6. Telrite customers are provided options if they exceed the number of minutes provided in their Lifeline plan. If at any time a customer purchases additional minutes, charges and plan options are available on the company website at www.lifewireless.com.
- 7. Telrite's toll-free customer service number is 888-543-3620. Customers may also dial 611 from their Life Wireless handset to reach customer service free of charge or by contacting Telrite via email at info@lifewireless.com. This information is provided in the terms of service and on the company website and in all information provided to subscribers.
- 8. Telrite responds to all consumer inquiries and complaints received from government agencies within 30 days.
- 9. Telrite has procedures in place to maintain the privacy of subscriber proprietary information in accordance with applicable federal and state laws.
- 10. Telrite has available to Lifeline customers an online portal where customers can check their balances and purchase additional minutes.



FCC Form 481 Section 600 - Functionality in Emergency Situations

Under FCC Rules, an ETC must demonstrate its ability to remain functional in emergency situations. Since Telrite Corporation d/b/a Life Wireless (Telrite) is providing service to its customers through the use of facilities obtained from other carriers, it is able to provide to its customers the same ability to remain functional in emergency situations as currently provided by the carriers to their own customers, including access to a reasonable amount of back-up power to ensure functionality without an external power source, re-routing traffic around damaged facilities, and the capability of managing traffic spikes resulting from emergency situations.

Telrite, along with their underlying carriers, have created back-up systems to ensure functionality in the event of a loss of power or network functionality. Telrite maintains its own diesel-powered backup generator at their switching facility in Georgia. All systems within the facility are implemented on redundant servers, each with redundant data network and power.